

OFFICE OF THE INSPECTOR GENERAL

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SNAPSHOT INSPECTION

SOUTHSIDE VIRGINIA TRAINING CENTER

PETERSBURG, VIRGINIA

Anita Everett, MD

Inspector General

Report # 62-02

EXECUTIVE SUMMARY

A Snapshot Inspection was conducted at Southside Virginia Training Center on June 11-12, 2002. The purpose of a snapshot inspection is to conduct an unannounced review of a facility with a primary focus on three quality of care areas. The areas are as follows: the general conditions of the facility, staffing patterns and concerns and active treatment.

A tour of eleven duplex cottages on the facility's campus revealed that overall, the units were clean, comfortable and well maintained. Staff efforts to make the environment homelike were evident throughout the tour.

Given the complexity of the residents served within this facility, the number of staff present was minimal. Staffing patterns did exceed the minimum numbers as established by SVTC. The inspection team was informed that the numbers of staff present the night of the inspection was not representative of the recent past. Recent staff shortages have resulted in low staff to patient ratios over the last several weeks.

Evening activities were evident. Active treatment programs were reviewed in the areas of prevocational, pre-community living and community living training.

The facility has been working on establishing a cooperative relationship with the local community college to provide enhanced career opportunities for the staff through grant application for federal funds to provide on-site classroom training opportunities, a child development center and after school program.

FACILITY: Southside Virginia Training Center
Petersburg, Virginia

DATE: June 11-12, 2002

TYPE OF INSPECTION: Snapshot Inspection - Unannounced

REVIEWERS: Cathy Hill, M.Ed.
Laura Stewart, LCSW
Heather Glissman, B.A.

REVIEW ACTIVITIES: A tour of the facility was conducted. Staff schedules were reviewed. Interviews were conducted with administrative and direct care staff.

GENERAL ENVIRONMENTAL ISSUES

Finding 1.1: Overall, the cottages inspected at this facility were clean, odor-free and well maintained.

Background: During the inspection a tour was completed in 11 cottages consisting of 22 units. Overall, the facility was clean, odor free and well maintained. Each unit was decorated, creating a homelike atmosphere. This included: borders, pictures; entertainment centers; faux and real plants; built-in book shelves; dining room furniture, tablecloths and placemats. The tour revealed that each unit had a neat, tidy appearance throughout all living areas.

Recommendation: Maintain current attention to a clean and orderly environment that reduces institutional appearance to the extent possible.

Finding 1.2: The facility grounds were nicely landscaped.

Background: During the tour, the inspection team observed that the facility has given considerable attention to beautifying the campus. This was accomplished through numerous shrubberies, flowers and generally well-maintained grounds. This represents significant improvement in these grounds. This campus gave the impression of a community based apartment complex.

Recommendation: Sustain the current beautification efforts.

STAFFING ISSUES

Finding 2.1: Staffing patterns were consistent with the prescribed facility standards.

Background: Interviews and observations demonstrated that the expected number of staff were available. All units visited had a staffing ratio of 2:8, except for Unit 30 in which one staff member was off the unit on break; Unit 31 had a 3:8 ratio; Unit 19 had a 1:8 ratio due to the second staff member being off campus for personal reasons; and Unit 28 had a ration of 3:10.

During interviews staff indicated that this was a full compliment of coverage, which was unusual due to recent staff shortages. One staff member indicated that there had been 11 separations from service on the evening shift in the past few months and nine on the night shift. During this inspection only one person reported working overtime during the shift.

Recommendation: Maintain current efforts to sustain facility staffing expectations.

Finding 2.2: There was significant variability among staff in ability to define examples of abuse and neglect.

Background: Out of ten staff interviewed five could not articulate working definitions of abuse and neglect. This represents a significant number of persons who would have difficulty maintaining the “watchful eye” necessary to actively prevent abuse and neglect from occurring. Without having a clear professional definition of abuse and neglect, staff may call upon their own personal ideas and experiences regarding discipline or behavior modification. Four out of the five staff that had difficulty relaying examples had less than five years of experience, one out of the five had almost thirty years but did not believe that abuse could occur to wheelchair bound residents, only incidents of neglect. Each staff relayed that they had received or would receive abuse and neglect training on an annual basis.

Recommendation: Consider conducting a competency evaluation of staff knowledge regarding abuse and neglect and conduct retraining as necessary.

Finding 2.3: SVTC is developing a plan for becoming a workforce development pilot project site.

Background: The facility has been working on establishing a cooperative relationship with the local community college to provide enhanced career opportunities for the staff through a grant application for federal funds to provide on-site classroom training opportunities, a child development center and after school program. A survey of need was conducted with staff. The survey noted that 30 individuals expressed an interest in pursuing nursing classes, 90 for classes in information technology, and 31 in allied health care professions such as physical therapy. Supportive service needs such as child or elder care needs were explored and addressed as ways of addressing potential barriers to staff members being able to successfully attend classes.

Recommendation: Maintain this commitment to provide career advancement training and professional development to all staff.

ACTIVE TREATMENT

Finding 3.1: SVTC provides a variety of active treatment for residents.

Background: The inspection team toured and observed active treatment that served 250 residents of the 405 total facility population. The facility begins to transport residents to their designated active treatment program at 8:15am; this is completed by 9:45am. Active treatment is offered in varying segments from 9:00am -2:30pm. The inspection team observed active treatment that included, pre-vocational training; pre-community

living training; and community living training. Each segment of active treatment was developed specifically to the individual needs of each resident. For example, two classes were comprised of visually impaired residents and the active treatment focused on environmental manipulation and included visual stimulation room. The inspection staff observed that the staffing patterns were consistent with facility expectations and because most residents remain within the educational building, the staffing included a nurse, Physical, Occupational and Speech therapy and nutritional management services located on site.

Recommendation: Continue to offer active treatment that has been developed to match each resident's varying developmental needs.